

# CORPORATE MANAGEMENT GROUP

## Employment Application

Office Hours: 9am-4pm Mon-Thur, 9am-3pm Fri

Office Number: 507-923-4955

Office Address: 3707 Commercial Dr. SW Rochester, MN 55902



### Applicant Information

*(APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS AND A BACKGROUND CHECK WILL BE COMPLETED)*

Please fully complete pages 1-3

Full Name: (Last Name, First Name) Chavez-Mendez Ana Date: 02/01/22

Address: (Street Address) 1408 4th St SE (Apt./Unit #) \_\_\_\_\_

(City) Austin (State) MN (ZIP Code) 55912

Phone: 507-460-8183 Email: chavez.anacu19@icloud.com

Social Security No. 603-13-0259 Date Available: \_\_\_\_\_

Position Applied for: North Desired Salary: 15<sup>00</sup>

Shift Available to work:  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup> Employment desired:  Full-Time  Part-Time

Are you authorized to work in the U.S.?  Yes  No

How did you hear about us? Indeed Referral Name: \_\_\_\_\_

If under 18, please list age: \_\_\_\_\_

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?  No  Yes

Education				
Type of School	Name of School	Location (Complete Mailing Address)	Number of Years Completed	Major & Degree
High School	Austin High School	Austin MN	11th grade	
College				
Bus. Or Trade School				
Professional School				

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### Previous Employment

Company: Hormel Foods Inc Phone: \_\_\_\_\_

Address: 711 Hormel Dr Supervisor: \_\_\_\_\_

Job Title: Quality Control Starting Salary: \$18.70 Ending Salary: \$18.90

Responsibilities: \_\_\_\_\_

From: 03 To: 2021 Reason for Leaving: WAS WORKING 7 days a week 12-18hrs a day

May we contact your previous supervisor for reference?  Yes \_\_\_ No



Company: Quality Pro Qpp Phone: \_\_\_\_\_

Address: 711 Hormel Dr Supervisor: Dang

Job Title: Process Control Starting Salary: \$17.90 Ending Salary: \$17.90 19.00hr

Responsibilities: \_\_\_\_\_

From: 11/2019 To: 02/21 2021 Reason for Leaving: I had one of the company's hardest jobs wasn't getting paid enough

May we contact your previous supervisor for reference?  Yes \_\_\_ No



Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for reference? \_\_\_ Yes \_\_\_ No



Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for reference? \_\_\_ Yes \_\_\_ No

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: [Signature] Date: 02/01/2022

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### PLEASE READ CAREFULLY APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Corporate Management Group, Inc.,

I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements and the like as they may exist from time to time, or other company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Corporate Management Group, Inc. (CMG), or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by an officer of CMG. Both the undersigned and CMG may end the employment relationship at any time, without specified notice or reason. If employed, I understand that CMG may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

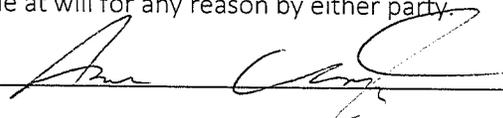
I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts will result in my disqualification from consideration for employment or, if discovered after I begin employment, will result in my termination. I hereby give CMG permission to contact schools, all previous employers (unless otherwise indicated), references and others and hereby release CMG from any liability as a result of such contact.

I understand that a comprehensive background check may be conducted to determine my eligibility for hire by CMG. This may include but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by CMG policies.

I release CMG and other persons or entities from any claims that might be based on CMG's decision to conduct a background check.

I understand that, in connection with the routine processing of your employment application, CMG may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living. Upon written request from me, CMG will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with CMG shall be probationary for a period of ninety (90) days and further that at any time during the probationary period or thereafter, my employment relationship with CMG is terminable at will for any reason by either party.

Signature of applicant  Date: 02/01/2022

**Ana Maria Chavez-Mendez**

1408 4th St SE  
Austin, MN 55912 United States  
Mobile: 5074608183 - Ext:  
Email: chavez.anaaa19@icloud.com

**Work Experience:****Hormel Foods Inc**

711 Hormel Dr  
Austin, MN 55912 United States

**02/2021 - 06/2021****Salary:** 18.70 USD Per Hour**Hours per week:** 40**Quality Control****Duties, Accomplishments and Related Skills:**

A few of my job duties and a QC (Quality Control) was to consult with management regarding food safety or quality issues, Provide leadership on food safety and quality in facility, Implement HACCP program (food safety) and oversee sanitation procedures (SSOP), I would collect and analyze data for new or modified product lines, Train new employees and manage quality auditors, Work with the USDA, Design and evaluate quality specifications and auditing programs. Also, would conduct quality system testing and evaluations using statistical analysis and Assist with computer inventory, lab management and data collection and Evaluate processes by utilizing food safety and/or sanitation principles.

**Supervisor:** Justin (5074375611)**Okay to contact this Supervisor:** Yes

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**Quality Pork Processors**

711 Hormel Dr  
Austin, MN 55912 United States

**10/2019 - 02/2021****Salary:** 19.00 USD Per Hour**Hours per week:** 40**Process Control Auditor/ Inspector****Duties, Accomplishments and Related Skills:**

My duties at working in management, as a PC, (process control) at a pork processing plant that was an initial Inspection Models Project (HIMP) plant. We had converted to the New Swine Inspection system NSIS. My duties here were to perform postmortem sorting activities. Along with HACCP monitoring checks to make sure are process is with in critical limits. My sorting activities include incising the lymphoid on the head. This allows me to look for pathogens like lymphoma and tuberculosis, I also look for contamination such as Ingesta. I inspect viscera and organs to make sure the product is free of contamination in the pan or product not suitable for human use, I mark the affected product with ink to condemned. I look for pathological conditions such as pericarditis, toxemia, septicemia and Icterus for example, I also palpitate the mesentery lymph nodes. When I identify that there is a condition, I tag the carcass and viscera for further disposition. My job is also to inspect carcass to mark trimming defects for example toenails, scuff, hair etc. If I observe a lot of defects, I alert a kill floor supervisor. I also check the carcass to make sure it does not have fecal, ingesta, and milk contamination. My duties off the line are to perform HACCP monitoring checks that include conducting 10 carcass zero tolerance audit every hour for fecal, and Ingesta, I immediately document my finds and initial it properly. While performing my zero tolerance check I also look for RTC (ready to cook) defects, for this I look to make sure the carcass are sufficiently free off hair, bile, and scuff for example. My finding's of my RTC check are also documented to make sure we are within our set standards. If not, I notify a kill floor supervisor of the issue, I also perform zero tolerance checks on head meat. Daily I perform SSOP (sanitation standard operating procedure) monitoring before the start of production and during production, I fill out a SSOP record of my findings. If a problem is discovered I take corrective action by tagging product or by tagging an area. I also

perform KIS (kidney Incubation) test on a routine basis; along with salmonella carcass sampling, I conduct this by swabbing the exterior of the carcass with a sponge to collect a sample. Through all my work it resulted in safe wholesome product for the consumer

**Supervisor:** Dang (5074346300)

**Okay to contact this Supervisor:** Yes

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**Education:**

Austin Austin, MN United States

Some high school (no diploma)

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**Language Skills:**

Language	Spoken	Written	Read
Spanish	Advanced	Advanced	Advanced
English	Advanced	Advanced	Advanced

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**References:**

Name	Employer	Title	Phone	Email
Steven Sawin (*)	USDA	USDA Inspector	5074020814	stevensawin@yahoo.com
Aryanna Canada (*)	Quality Pork Processors	Process Control Auditor/ Inspector	5074380942	aryannacanda1825@gmail.com
Mireya Martinez (*)	Quality Pork Processors	Process Control Auditor/ Inspector	5074815338	gmireya885@gmail.com

(\*) Indicates professional reference

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## CMG/Reichel Foods, Inc. \$2,000.00 Retention Bonus

Thank you for accepting a position with CMG and Reichel Foods, Inc. By accepting this position, you are eligible for a \$2,000 Retention Bonus. Please read the below requirements and conditions about the sign-on bonus followed by your signature.

### Requirements and Conditions for the \$2,000 Retention Bonus

- You must pass all Reichel Foods, Inc. hiring requirements before you are eligible for hire
  - o You must complete the CMG/Reichel Foods, Inc. orientation
  - o You must pass a drug screen and background check
  - o You must meet Reichel Foods, Inc. language requirements
  - o You must meet company policies and practices for attendance and performance
- If you resign or your assignment ends, you will forfeit any remaining portion of the Retention Bonus.
- The bonus amount is for \$2,000 total
  - o You will receive weekly payments of \$41.67 for 12 weeks (totaling \$500)
  - o After which, you will receive a \$500 check from CMG after each quarter worked (i.e. 13 weeks) for the following 3 quarters. This totals \$1,500.
- Payroll taxes (including State & Federal Income Taxes) will not be withheld from your \$500 checks that are provided by CMG. You will be responsible for the tax liability when you file your individual income tax returns.
- You will receive a 1099 for payments from CMG for any tax year you were paid the bonus.

*\*I acknowledge that I have read and understand the terms and conditions above regarding the \$2,000 Retention Bonus with CMG and Reichel Foods, Inc.*

Employee Name	Signature	Date
<u>Ana Chavez-Mendez</u>	<u>Ana CMG</u>	<u>02/10/22</u>

CMG Representative Name	CMG Representative Signature	Date
<u>Kelly M. Sartan</u>	<u>KMS</u>	<u>2.2.2022</u>



## New Employee Acknowledgement Form

Welcome to CMG and Reichel Foods!

As a new employee, you will be provided with the website, username and password to view the new hire forms that you signed during your CMG interview. Please sign and date the bottom of the sheet stating that you received your login information.

**CMG/ ESSG / Reichel Foods Handbook**

**Healthcare Notice of Exchange and Website for Enrollment**

**Safety Policy**

**Drug and Alcohol Testing Policy**

**View Paystubs**

**Website:** <https://zenople.esgazure.com/login/cmg>

\*\* do not fill out the below login name and password, CMG will provide you with this information \*\*

**Login Name:** 5074608183

**Login Password:** Ac@0259

I hereby acknowledge that I have been provided with the login information to view the items listed above. I understand that it is my responsibility to read and follow each document provided to me and that if I have any questions concerning the times or its content, that it is my responsibility to address my questions with my supervisor or CMG representative, and hereby waive any claim, now or in the future, that I did not receive, did not read or did not comprehend the items or their contents.

**Signature:**  **Date:** 02/01/22

# CMG Preliminary Questions

Name: Ana Chavez Monera

Date: 02/01/22



## Please Mark Yes or No

1. If hired are you willing to take a drug test?  Yes  No
2. Do you have any known food allergies to soy, wheat, peanuts, or milk? Yes  No
3. Are you able to work with pork?  Yes  No

## Please Mark Your Preferred Position

4. Which plant do you prefer?  South  North
5. What shift to you prefer?  1st  2nd  3rd

**\*To be completed during or after interview\***

Have you ever been convicted of a crime? Yes \_\_\_ No

Explain

Incident \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employee Signature Ana Chavez Monera

Interviewer Signature Kellyn Sutter

Name: Ana Chavez-Mendez

Date: 02/01/22

## Achool!

**\*\*Read the story and answer the multiple-choice questions below \*\***

Achool! We all sneeze sometimes. Sneezing is a reflex that your body does automatically. That means you cannot make yourself sneeze or stop one once it has started. When you sneeze, your body is trying to get rid of bad things in your nose, such as bacteria. You have extra germs when you have a cold, so you sneeze a lot more. You might also sneeze when you smell pepper!

Inside your nose, there are hundreds of tiny hairs. These hairs filter the air you breathe. Sometimes dust and pollen find their way through these hairs and bother your nasal passages. The nerves in the lining of your nose tell your brain that something is invading your body.

Your brain, lungs, nose, mouth and the muscles of your upper body work together to blow away the invaders with a sneeze. When you sneeze, germs from your nose get blown into the air. Using a tissue or "sneezing into your sleeve" captures most of these germs. It is very important to wash your hands after your sneeze into them, especially during cold and flu season.

Do you ever sneeze when you walk into bright sunlight? Some people say that happens to them often. Scientists believe the UV rays of the sun irritate the nose lining of these people, so they sneeze.

If someone nearby sneezes, remember to tell them "Gesundheit!" that is a funny-looking word which is pronounced "gezz-oont-hite." It is the German word that wishes someone good health after sneezing.

1. Why do people sneeze?
  - a. The tiny hairs in your nose tickle
  - b. Your body is trying to get rid of bad things
  - c. You can make yourself sneeze when you want to
2. What are the 3 parts of your body that work together with your upper body to sneeze?
  - a. Hand, Elbow, Shoulder
  - b. Ankle, Knee, Hip
  - c. Brain, Lungs, Mouth
3. What other things can make you sneeze?
  - a. Pepper, Sun, Dust, and Pollen
  - b. Water, Pop, Flowers, Trees
  - c. Salt, Seasonings, Meat, Fruit
4. What is a German word that people often say to someone that sneezes?
  - a. Good Job
  - b. Gesundheit
  - c. Hang in there
5. What should you do after your sneeze into your hands especially during cold and flu season? (This should also be done in the production area!)
  - a. Wipe them with a tissue
  - b. Nothing
  - c. Wash your hands

# Authorization to Enter New Hire Information

By signing below, I authorize a member of Corporate Management Group – Rochester Office – to enter my new hire paperwork into the online Zenople (NHO) site. I understand that I will be provided access via login name and password to view the forms that they have completed on my behalf.

Employee Signature:  Date: 02/01/22

## Insurance Information

I understand that the CMG Staff defaults to decline insurance when entering my new hire paperwork unless specified otherwise during my interview.

I understand that I have 30 days after my employment starts to apply for insurance through ESSG via the login information provided to me.

I agree: AC (initial)

## Electronic W-2 Consent:

The IRS has approved employers to send W-2 electronically to employees. Employees who choose to receive their W-2 statements electronically will have the following advantages. Faster access to your W-2. Ongoing availability to view the W-2. Ability to reprint as many times as needed.

**Would you like to receive your W-2 statement electronically?**

Yes  No

By completing the box below, you are consenting to receive your W-2 by email to only the email address that you list. A paper copy will *not* be provided. This option can be changed at any time but remains in effect until you inform ESSG that you would like to revoke your consent.

I consent to receive my W-2 by email at the address listed below from this date forward.

Email

Chavez.anna192@crovcl.com

I agree: AC (initial)

## Applicant Certification and Authorization for Background Check

*Please read the below statements and initial on the indicated line*

**(This information will be inputted onto the online NHO form – you will be provided the login information during your interview)**

I authorize Employer Solutions Staffing Group (ESSG) to use the information and statements contained in this application to determine my qualifications. I authorize ESSG to make inquiries of my former employers, except as indicated in this application, regarding my previous duties, responsibilities, performance, compensation and eligibility for rehire.

I understand that comprehensive background checks may be conducted to determine my eligibility for my hire by certain clients of ESSG. This may include – but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by ESSG policies.

I release ESSG and other persons or entities from any claims that might be based on ESSG's decision to conduct a background check. I certify that all statements made in my application are true and accurate and that I have not omitted any material information or provided false or misleading information. I understand that any material omission or misrepresentation will result in my disqualification from consideration for employment or if discovered after I begin my employment, will result in my termination.

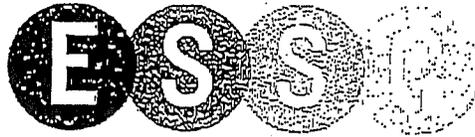
If hired, I agree to abide by the policies and procedures of ESSG.

I have read and agree AC (initial)

I hereby authorize Employer Solutions Staffing Group, LLC and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment purposes. I understand that the scope of the consumer report / investigative consumer report may include, but is not limited to the following areas: verification of social security number, credit reports, current and previous residences, employment history, education background, character references, drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, country jurisdictions, driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation or public agency to divulge any and all information, verbal or written, pertaining to me, to Employer Solutions Staffing Group, LLC or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation or public agency may have to include information or data received from other sources Employer Solutions Staffing Group, LLC and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers and dates of birth.

I have read and agree AC (initial)



employer solutions staffing group.

## Notification of Minnesota Law Requirement – Unemployment Acknowledgement

*According to Minnesota Statute section 268.095, subdivision 2, paragraph (d), an applicant who; within five calendar days after completion of a suitable job assignment from a staffing service, (1) fails without good cause to affirmatively request an additional suitable job assignment, (2) refuses without good cause an additional suitable job assignment offered, or (3) accepts employment with the client of the staffing service, is considered to have quit employment.*

*This paragraph applies only if, at the time of beginning of employment with the staffing service, the applicant signed and was provided a copy of a separate document written in clear and concise language that informed the applicant of this paragraph and that unemployment benefits may be affected.*

It is your responsibility to contact ESSG through the recruiter stated below for additional assignments. If you fail to do so, it may affect your unemployment benefits.

I understand by signing this form that I am responsible to contact ESSG through the recruiter stated below within 5 calendar days once an assignment ends. I also acknowledge that I have been provided a copy of this form. SM \_ (Initial)

Recruiter: Corporate Management Group

Phone Number: 303-9201425

Address: 1501 W. 124th Ave Unit 500 Westminster, CO 80234

 02/04/22  
Employee Signature: Date:

Anna  
Employee (please print your name here)

# Voluntary Covid -19 Vaccination Status Certification

I understand that providing information regarding my vaccination status is currently voluntary. However, I also acknowledge that failure to provide this information may have an effect on my ability to be placed on specific assignments, should the employing company have a vaccination policy.

Are you Vaccinated against Covid-19?

*If Yes-*

Are you Fully Vaccinated or Partially Vaccinated?

- Fully Vaccinated
- Partially Vaccinated

*If No-*

If you are exercising your right not to receive the vaccination: Are you willing to submit to regular COVID-19 testing?

- Yes
- No

I hereby voluntarily release my vaccination status to ESSG and their agent.

I read and agree